

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IOWA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
2009 JAN -5 PM 12:08

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

IMPORTANT: Indicate by # type of committee you are reporting for:
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: Nate Williams Political Party (If applicable): Democrat
Office Sought: Iowa House District (If Senate or House): 29

FORM DR-2 (Rev. 07/2007) DISCLOSURE REPORT
For Office Use Only
Comm. # 1753
Logged In _____
Scanned _____
Computer _____
Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

[Signature] 319 895 8931 1.2.28.08
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A _____ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date) _____ Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED 7/19-10/14
 Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election _____
County & Local Committees, enter County in which Election is held _____

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \$ 36,490.41

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 35,730.00

Schedule F: Loans Received total (Attach Schedule F) 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 72,220.41

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 25,653.76

Schedule F: Loan Repayments total (Attach Schedule F) 0

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$ 46,566.65

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 113.96

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 700.00

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7.17	ID# CK# 1037	LYNCH ROAD MID HWY 30W MT. VERNON, 52214	veh. maint - Nite Tire rotation oil change	\$ 32.56
7.17	ID# CK# 1035	Lisbon P.O. Lisbon, 52253	P.O. Box Rental	26.00
7.15	ID# CK# 1031	Lisbon P.O. Lisbon, 52253	STAMPS	210.-
7.14	ID# CK# 1032	AD CRAFT PO Box 244 C.R.I., 52244	CAMPAIGN STICKERS	360.40
7.16	ID# CK# 1033	CARTER PRINTING 1739 E GRAND AVE DES MOINES, 50316	CAMP. CARDS remittance envel.	797.25
7.16	ID# CK# 1034	CARTER PRINTING 1739 E GRAND DES MOINES, 50316	Letterhead + envelopes	954.86
7.17	ID# CK# 1036	SAM SALKSTRO 307 B Wolfe Ln MT VERNON, 52214	stipend	780.-
7.26	ID# CK# 1038	JOHN'S GROCERY 401 E. MARKET IC, IA 52245	wine for 7/27 fundraiser	101.73
SUB-TOTAL				\$ 2662.89
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(1).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Wellness

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10.13	ID# CK# 1060	SAM Salustro 307 B Wolfe Ln MT Vernon, 52314	GAS	\$ 100.00
10.8	ID# CK# ON 1116	Auburn Quad PO Box 390729 Cambridge, 02137	Transmittal Rpt	31.61
10.10	ID# CK# 1001	MT. V. SUN Newspaper MT. Vernon, 52314	Newspaper Ad	260.-
10.14	ID# CK# 1002	Ferry Lessmeier 307 B Wolfe Ln MT. Vernon, 52314	Donation J. Co. Mental Health	100.-
10.14	ID# CK# 1003	ON Media 6300 Council St CUR, 52402	Comm. Air time	3,360. ⁰⁵
10.14	ID# CK# 1004	MT. V. P.O. MT Vernon, 52314	Stamps	126.-
10/10	ID# CK# 1058	Solon Economist		(139.50)
SUB-TOTAL				\$ 3,977. ⁶⁶
TOTAL (if last page of this schedule)				\$

removes duplicate entry

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:
 Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)
 Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 66A.402(3)(I).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
<i>10.12</i>	<i>ACT Blue</i>	<i>Auburn Quad PO Box 390728 Cambridge, 02139</i>	<i>TRANSMITTAL RPT</i>	<i>\$.99</i>
<i>10.12</i>	<i>ACT Blue</i>	<i>Auburn Quad PO Box 390728 Cambridge, 02139</i>	<i>TRANSMITTAL RPT</i>	<i>3.95</i>
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			

SUB-TOTAL \$ *4.94*

TOTAL (if last page of this schedule) \$ *25,653.76*

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE
2008 OCT 20 PM 12:49

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams
IMPORTANT: Indicate by # type of committee you are reporting for: 1
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

FORM DR-2
(Rev. 07/2007) **DISCLOSURE REPORT**
For Office Use Only
Comm. # 1753
Logged In S e
Scanned _____
Computer _____
Audited 33 pages

CANDIDATE COMMITTEES ONLY:
Candidate Name Nate Williams Political Party (if applicable) Democrat
Office Sought Lawyer House District (if Senate or House) 2-9

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

M. A. [Signature] 319.896.9931 10.20.08
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 7/15/08 - 10/14-08 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by #
 CHECK IF AMENDMENT TO REPORT DATED _____
 Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)
Local Committees, enter Date of Election _____
County & Local Committees, enter County in which Election is held _____

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \$ 36,414.09

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) 36,730.00

Schedule F: Loans Received total (Attach Schedule F) 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL..... \$ 73,144.09

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)..... 25,793.17

Schedule F: Loan Repayments total (Attach Schedule F)..... _____

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$ 47,350.92

****UNPAID BILLS** (From Schedule D - Attach Schedule D)..... \$ _____

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)..... \$ 113.96

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)..... \$ 700.-

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

STATE CANDIDATES NOTE: IF CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7-15	ID# CK# 13706	MARY JANE McWilliams 11 Hillcrest Hts. MT VERNON, 52314		\$ 50.-	<input type="checkbox"/>
7-15	ID# CK# 429	MARGARET RYAN 481 FT WASH. AVE 5B NY NY 10033		\$ 50.-	<input checked="" type="checkbox"/>
7-17	ID# CK# 4317	MARTHA SCHULT 1326 OXFORD PL IC, IA 52242		\$ 150.-	<input checked="" type="checkbox"/>
7-18	ID# CK# 2330	JOHN RICCOB 425 2ND ST SE #1140 GA 32401		\$ 250.-	<input checked="" type="checkbox"/>
7-18	ID# CK# 8575	HELEN DANFORTH 415 4TH AVEN. MT. VERNON, 52314		\$ 50.-	<input checked="" type="checkbox"/>
7-18	ID# CK# 6464	VERNE KELLEY 376 KOEHL AVE IC 52246		\$ 15.-	<input checked="" type="checkbox"/>
7-18	ID# CK# 2446	JESSICA LOOMAN 937 LAUREL AVE ST. PAUL, MN 55104		\$ 25.-	<input checked="" type="checkbox"/>
7-18	ID# CK# 3264	Todd Pufahl 13617 Duluth Dr Apple Valley, MN 55124		\$ 25.-	<input checked="" type="checkbox"/>
7-18	ID# CK# 2948	STEVE ADAMS 1 Hillcrest Hts MT. VERNON, 52314		\$ 25.-	<input checked="" type="checkbox"/>
7-17	ID# CK# 1958	DELORES LIPSON 219 6th AVE N MT. VERNON, 52314		\$ 50.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 690	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form



SCHEDULE	
A	MONETARY RECEIPTS
(Rev. 07/03)	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Candidates for Wellman

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(8), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7.19	ID# CK# 9348	MART BOWERS 203 LINCOLN Hwy MT. VERNON, 52314		\$ 25.-	<input checked="" type="checkbox"/>
7.19	ID# CK# 2234	Sue Harm 603 24th ST Austin, MN 55912		100.-	<input checked="" type="checkbox"/>
7.19	ID# CK# 6519	DONNA CASSUTT 815 E 61st ST MINN, MN 55417		25.-	<input checked="" type="checkbox"/>
7.19	ID# CK# 4253	T.L. DONCAVAGE 9953 NARRIATE Aves Bloomington, MN 55420		50.-	<input checked="" type="checkbox"/>
7.19	ID# CK# 10597	Rod Hegelvedt 201 SYLVAN LN NE Fridley, MN 55432		25.-	<input checked="" type="checkbox"/>
7.19	ID# CK# 1931	ANNA Kraljic 2913 14th Aves MINN, 55427		25.-	<input checked="" type="checkbox"/>
7.19	ID# CK# 1030	Alyssa Mueller 1042 IVY AVE E ST PAUL, MN 55106		100.-	<input checked="" type="checkbox"/>
7.19	ID# CK# 3448	DAVID Purdy 1434 E Bloomington Jct., IA 52245		50.-	<input checked="" type="checkbox"/>
7.20	ID# CK# 6915	Scott Peterson 39 3rd ST. SE MT. VERNON, 52314		150.-	<input checked="" type="checkbox"/>
7.21	ID# CK# 5237	Rose-Alice BROKAW 3796 Cottage Res. Rd. Solon, IA 52383		50.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 600.-	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)

SCHEDULE	
A	MONETARY RECEIPTS
(Rev. 07/03)	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Candidates for Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(8), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7.25	ID# CK# 2473	JAMES HAGGAR 204 W. STERN AVE #302 ST. PAUL, MA 55102		\$ 100	<input checked="" type="checkbox"/>
7.25	ID# CK# 1559	Geo. Yapple 2307 3rd AVE COUNCIL BLUFFS, 51501		100.-	<input type="checkbox"/>
7.22	ID# CK# 7551	Doug Beard 604 7th ST Springville, 52336		40.-	<input type="checkbox"/>
7.23	ID# CK# 2269	DIANE HOFFMAN 203 A. AVE S. MT. VERNON, 52314		100.-	<input checked="" type="checkbox"/>
7.21	ID# CK# 6682	MARY NEIL JACKSON 532 ST. THOMAS CT IC, 52245		25.-	<input checked="" type="checkbox"/>
7.22	ID# CK# 2159	Trude Elliott 209 6th ST ND MT. VERNON, 52314		150.-	<input checked="" type="checkbox"/>
7.23	ID# CK# 2833	GARY Goldstein 548 forest DR SE C.R. 32409		50.-	<input checked="" type="checkbox"/>
7.21	ID# CK# 5439	Melanie Friedman 1 Knollwood LN IC, 52345		250.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 7309	ANN Stovel 1621 Museum Rd MT VERNON, 52314		150.-	<input checked="" type="checkbox"/>
7.22	ID# CK# 4562	MARTY ST CLAIR 608 7th AVEN MT. VERNON, 52314		150.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1115.-	
TOTAL (if last page of this schedule)				\$ 1115.-	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)



SCHEDULE	
A	MONETARY RECEIPTS
(Rev. 07/03)	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Wilson

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$760 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purposes by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7.22	ID# 6089 CK# 395	OPERATING ENG. Local 937 4880 Nubbell DES MOINES, IA 50317		\$ 250.-	<input type="checkbox"/>
7.21	ID# CK# 4936	Michael Wilde 211 WASHINGTON AVE N MINN., 55401		50.-	<input checked="" type="checkbox"/>
7.22	ID# CK# 6309	JACK EVANS 2336 LINDEN DR S.E C.R., 52403		50.-	<input checked="" type="checkbox"/>
7.24	ID# CK# 2517	Cathy Gullickson 259 ABBOTSFORD Rd C.R., 52403		100.-	<input checked="" type="checkbox"/>
7.24	ID# CK# 1169	ALAN Shepley 4 Hillcrest Hgts MT. VERNON, 52314		100.-	<input checked="" type="checkbox"/>
7.24	ID# CK# 8838	KATRINA GARNER 900 1ST ST. S.W MT. VERNON, 52314		100.-	<input checked="" type="checkbox"/>
7.22	ID# CK# 1126	JAMES LAKEW 252 E 3rd ST DES MOINES, 50309		100.-	<input type="checkbox"/>
7.25	ID# CK# 4573	Judy Stein 703 6th AVE. N. MT. VERNON 52314		50.-	<input checked="" type="checkbox"/>
7.24	ID# CK# 3470	SARA CORBIN 230 Seaby Rd MT. V. 52314		100.-	<input checked="" type="checkbox"/>
7.29	ID# CK# 3060	DAVID Leshtz Box 1945 I.C., 52244		100.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1,000.-	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Willard

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7.27	ID# CK# 9678	Loret MAST 631 E College ST I.C., 52240		\$ 25.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 11417	Sue Olson 4019 Windham Woods Ct C.R., 52408		100.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 5949	Bob Dvorsky 412 6th St Cornalville, 52241		30.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 1185	Robert Rush 900 2nd ST SE #605 C.R. 32401		250.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 5729	CANDY PALMER 1341 Springville Ad MT.V., 52314		50.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 1045h	DAVE LOEBSTAK 610 3rd Ave N. MT.V., 52314		100.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 9543	SUSAN COLL 302 S. 2nd ST MT.V. 52314		50.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 1684	Ben Rogers 339 30th ST DR C.R., 52408		50.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 1111	Matthew Nagle 311 7th ST SE MT.V. 52314		50.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 5967	Larry Bartlett 2688 Hidden Valley Solon, 52339		100.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$825.-	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE	
A	MONETARY RECEIPTS
(Rev. 07/03)	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Wilkerson

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(8), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7.27	ID# CK# 8584	Linda Steen 625 Crastview Dr. Mechanicsville 52806		\$ 200.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 1128	Megan Stewart 320 1/2 S. Washington Lisbon, 52233		25.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 15029	Eliot Keller 1244 Devon Dr NE IC, 52240		50.-	<input checked="" type="checkbox"/>
7.28	ID# CK# 6438	Jo Wilch 507 A Wash. Ct. Mt. V, 52314		50.-	<input checked="" type="checkbox"/>
7.25	ID# CK# 975	Paul Deaton 1664 Camelback Rd Solon, 52333		50.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 154	Charles Clark 511 Washington Ct Mt. Vernon, 52314		50.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 4056	S. Kucera 5645 180th St. NE Solon, 52333		100.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 4308	Truman Jordan 217 53rd St Mt. V, 52314		100.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 14282	Lu Anita Barron 195 Graybrook SE C.R., 52403		100.-	<input checked="" type="checkbox"/>
7.27	ID# CK# 5565	Robert D. Arnold 250 Lincoln Hgts Dr SE CR, 52403		100.-	<input type="checkbox"/>
SUB-TOTAL				\$ 825.-	
TOTAL (if last page of this schedule)				\$	5,055

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens Love Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7.27.08	CK# 145h	UNIDENTIFIED		\$ 50.-	<input checked="" type="checkbox"/>
7.27	CK# 1862	Leta Wain 186 Cherry Hill Rd NW G.R. 52405		20.-	<input checked="" type="checkbox"/>
7.28	CK# 1498	Margaret Elliss 409 N. 3rd St MT. Vernon, 52314		25.-	<input checked="" type="checkbox"/>
7.28	CK# 1184	Jane Silliman 2125 Norcor Ave #4 Coralville, 52241		50.-	<input checked="" type="checkbox"/>
7.30	CK# 3509	Donald Glasson 3935 Monarch Ave MARION, 52302		25.-	<input checked="" type="checkbox"/>
7.31	CK# 1501	David Cox 922 Lakeshore Dr Cedar Falls, 50613		100.-	<input checked="" type="checkbox"/>
7.31	CK# 7721	Dorona Rotschafar 219 5th Ave N MT. Vernon, 52314		25.-	<input checked="" type="checkbox"/>
8-1	CK# 857	ERIN Petergon 540 N. ST. STREET #306 Chicago 60610		100.-	<input type="checkbox"/>
8-1	CK# 2602	DAVID Redlawsk 26 GATLUP PL Tulsa, 52246		50.-	<input checked="" type="checkbox"/>
8-1	CK# 13642	Kevin Collins 356 Sycamore CR. Adg MARION 52302		50.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$495.-	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens Leo Willemas

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8.2	ID# CK# 4277	Wm. Graham 2080 Lind Blvd SE C.A., 52403		\$ 50.-	<input checked="" type="checkbox"/>
8.2	ID# CK# 7307	Robert Bacon 1965 Jeffrey St I.C., 52246		100.-	<input checked="" type="checkbox"/>
8.4	ID# CK# 6799	Michael Ryan 115 Candlestick Dr MT. V., 52314		25.-	<input checked="" type="checkbox"/>
7.27	ID# CK# CASH	Jay Willemas 401 E. 5th St ANAMORA, 52205	FATHER	100.-	<input checked="" type="checkbox"/>
7.29	ID# CK# 6116	Political Action - IA Dealers 1311 50th St W. Des M., 40266		100.-	<input type="checkbox"/>
7.29	ID# CK# 6059	IA. Comm. of Auto. Retailers 1111 Office PK Rd W. Des Moines, 50265		200.-	<input type="checkbox"/>
8.2	ID# CK# 8355	Jane Carlson 220 Scoby Rd MT. Vernon, 52314		50.-	<input checked="" type="checkbox"/>
8.3	ID# CK# 10464	Alice Nealey 208 B Greenwood Tr. C.A., 52405		50.-	<input checked="" type="checkbox"/>
8.6	ID# CK# 9742	ANN Booth 717 6th Av N MT. Vernon, 52314		150.-	<input checked="" type="checkbox"/>
8.3	ID# CK# AN LINE	DAN KRUPNICK 118 Solar St SYRACUSE, NY 13204		25.-	<input type="checkbox"/>
SUB-TOTAL				\$856	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)		MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM		

CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizen's Love Wellness

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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8-6	ID# CK# 7003	ABBY JENSEN 205 2nd Ave N. MT. VERNON, IA 52244		\$ 50.-	<input type="checkbox"/>
8-6	ID# CK# 2291	John Neff 1 OAKHOLL CT I.C., IA 52246		25.-	<input type="checkbox"/>
8-14	ID# CK# 6217	Dave Ostberg 318 2nd AVEN MT. VERNON, IA 52244		250.-	<input type="checkbox"/>
8-14	ID# CK# 4145	Michael Warner 900 E 3rd ST ARROWHEAD, IA 52205		50.-	<input type="checkbox"/>
8-15	ID# CK# 1241	BRAD VAN WAGEN 848 20th ST SE C.R., IA 52203		50.-	<input type="checkbox"/>
8-15	ID# CK# 6004 4743	ASSOC. GEN. CONTRACTORS 701 E CT AVE DAS MOLLENS, IA 52209		1,500.-	<input type="checkbox"/>
8-14	ID# CK#	DEPT Blue ON LINE JEFF QUINN 9101 HORSESHOE CT. C.R., IA 52241		100.-	<input type="checkbox"/>
8-18	ID# CK# 3695	NANCY OLTHOFF 2129 SLAGLE CIRCLE I.C., IA 52246		100.-	<input type="checkbox"/>
8-20	ID# CK# 9645 1587	LINN PHOENIX CLUB PO BOX 1612 C.R., IA 52206		2,000.-	<input type="checkbox"/>
8-20	ID# CK# 3014	DAVE STROEN 16 BRIAR RIDGE DR SE I.C., IA 52240		50.-	<input type="checkbox"/>
SUB-TOTAL				24,175.-	
TOTAL (if last page of this schedule)				\$ 10,575.-	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8.22	ID# CK# 5990	NADEY THOMAS 418 A 2nd Ave S.W MT. VERNON, 52314		\$ 100.-	<input type="checkbox"/>
8.4	ID# CK# 2306	Tom Aller 1089 Cedar Woods Rd C.R., 52403		250.-	<input checked="" type="checkbox"/>
8.22	ID# CK# 6216 1285	IBEW LOCAL 1362 370 Blair's Ferry Rd C.R., 52402		150.-	<input type="checkbox"/>
8.24	ID# CK# ACT Blue ON LINE	Matt Humm 2650 U. Ave N. ST. PAUL, MN 55114		150.-	<input type="checkbox"/>
8.28	ID# CK# 7136	Kent Fuller 5285 Responkamps Ad. S.W Riverside, 52327		50.-	<input type="checkbox"/>
8.31	ID# CK# 1601	MATT BIRKENSHIP 408 MANTLE T.C., 52244		25.-	<input type="checkbox"/>
9.1	ID# CK# 6062	Linda LAWSTON 4257 SUNRISE CT 55 C.R., 52403		75.-	<input type="checkbox"/>
9.1	ID# CK# 14682	MARK DENNISTON 305 Broadway Oxford Junction, 52328		25.-	<input type="checkbox"/>
9.1	ID# CK# ACT Blue ON LINE	Patrick Maloney #105 NW 150th TR. OKLAHOMA City, 73134		100.-	<input type="checkbox"/>
9.1	ID# CK# ACT Blue ON LINE	JAMES TASSINI 912 Euclid Ave #4 Miami Beach, 33129		50.-	<input type="checkbox"/>
SUB-TOTAL				\$975.-	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9.3	ID# CK# 12.192	JAMES Schuller 1000 42nd St SE Sedar Rapids, 52402		\$ 100.-	<input type="checkbox"/>
9.4	ID# CK# 4871	Peter Fisher 3109 110th St. NE SOLON, 52333		100.-	<input type="checkbox"/>
9.5	ID# CK# 1753 1827	Well PAC 636 Grand Ave #13 Des Moines, 50309		250.-	<input type="checkbox"/>
9.5	ID# CK# 3581	Mildred Morf 1056 E Bertram Rd MT VERNON, 52314		100.-	<input type="checkbox"/>
9.10	ID# CK# 245H	MARY Burke 306 W South St Lisbon, 52253		50.-	<input type="checkbox"/>
9.2	ID# CK# 8519 3904	Chicago Reg. Council of Carpenters 12 E Erie St Chicago, Ill 60611		300.-	<input checked="" type="checkbox"/>
9.6	ID# CK# 6070 3780	Iowa LawPAC 521 E Council St Des Moines, 50309		1,000.-	<input type="checkbox"/>
9.7	ID# CK# ACT Blue ON LINE	GUN DONHAAT 420 NW 11th Ave #1205 Portland, OR 97209		500.-	<input type="checkbox"/>
9.9	ID# CK# ACT Blue ON LINE	TIM Semeiroth 3604 Honey Hill DR SE OR 52403		250.-	<input type="checkbox"/>
9.9	ID# CK# ACT Blue ON LINE	DANIEL KRUPNICK 115 SOLAR ST SYRACUSE, 13204		25.-	<input type="checkbox"/>
SUB-TOTAL				\$2,675.-	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens Law Alliance

STATE CANDIDATE NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9.9.08	ACT Blue CK# ONLINE	Holly Armstrong 1931 E 17th Ave Denver, CO 80218		\$ 100.-	<input type="checkbox"/>
9.9	ACT Blue CK# ONLINE	Emily Campbell 5285 Diamond Hts Blvd SAN FRAN, CA 94131		100.-	<input type="checkbox"/>
9.9	ACT Blue CK# ONLINE	Michael Bigley 504 10th Ave NW MT VERNON 52314		50.-	<input type="checkbox"/>
9.8	ID# CK# 6356 1484	Freedom Fund PAC 1171 7th St Des Moines, IA 50314		600.-	<input type="checkbox"/>
9.10	ID# CK# 10723	Kathleen Bass 7 SYLVEN LN CA, 52403		100.-	<input type="checkbox"/>
9.12	ID# CK# 1049	Chris Street 925 E. WASHINGTON ST IC 52240		20.-	<input type="checkbox"/>
9.12	ID# CK# 14093	Janet Lyness 3010 Creighton Dr. E.C., 52245		50.-	<input type="checkbox"/>
9.16	ID# CK# 4208	Norman Karvig 1945 PARK AVE C.A. 52403		25.-	<input type="checkbox"/>
9.16	ID# CK# 4855	Richard Swanson 910 ALABAMA JADIN, MO, 64202		50.-	<input type="checkbox"/>
9.10.8	ID# CK# A272	BARBARA BAISTEL 135 PARK Blvd Montevideo, 52310		25.-	<input type="checkbox"/>
SUB-TOTAL				\$1520.-	
TOTAL (if last page of this schedule)				\$	

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No. 1167 P. 15
SCHEDULE A
 (Rev. 07/03) **MONETARY RECEIPTS**
 CHECK THIS BOX IF AMENDING FORM

CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

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9-11-08	ID# CK# 6338	Louise Gisolfi 13 Briar Ridge Dr Iowa City, 52240		\$ 50.-	<input type="checkbox"/>
9-19	ID# CK# 3144	Richard Petersen 603 3rd Ave N.W MT. VERNON, 52314		25.-	<input type="checkbox"/>
9-19	ID# CK# 6711	Thomas Wertz 228 LINCOLN HTS. DR Geddes RAIDS, 52403		250.-	<input type="checkbox"/>
9-20	ID# CK# 2154	Wm. Niemi 512 A Ave SE MT. VERNON, 52314		30.-	<input type="checkbox"/>
9-20	ID# CK# 6580	Ruth Miller 8 Hillcrest Hts MT. VERNON, 52314		25.-	<input type="checkbox"/>
9-21	ID# CK# 2169	Doug Hanson 412 N 3rd St MT VERNON, 52314		25.-	<input type="checkbox"/>
9-21	ID# CK# 7224	Chris J. Luzzie 338 Koser Ave J.C. 52246		250.-	<input type="checkbox"/>
9-18	ID# ACT Blue CK# 021100	Sirena Gastile 315 S. Virgil Ave #103 Los Angeles, 90020		25.-	<input type="checkbox"/>
9-9	ID# ACT Blue CK# 021100	Matthew Hartwig 701 MASS Ave NW WASHINGTON DC, 20004		50.-	<input type="checkbox"/>
9-9	ID# ACT Blue CK# 021100	PATRICK Mullet 420 Iowa St Box 406 Hills, 52235		15.-	<input type="checkbox"/>
SUB-TOTAL				\$ 735.-	
TOTAL (If last page of this schedule)				\$	16,430

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No. 1167 P. 16
SCHEDULE A
MONETARY RECEIPTS
 (Rev. 07/03)
 CHECK THIS BOX IF AMENDING FORM

CONTRIBUTIONS -- MONEY TAKEN IN
 (including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Williams

TATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9.12	ACT Blue ON line	AAARON PICKRELL 34 N. Remington Rd Bexley, OH 43209		\$ 250.-	<input type="checkbox"/>
8.24	6321	CARL ROSEN 3134 S. Kedvale Chicago, IL 60623		50.-	<input type="checkbox"/>
8.15	1630	CHRISTOPHER THUNSADE 6038 Richmond Hwy, #504 Alexandria, VA 22304		25.-	<input type="checkbox"/>
9.4	4309	Dr. Chira. Society 1609 N. Rockaway Blvd #102 Rockaway, IL 60087		100.-	<input type="checkbox"/>
9.18	6418 1128	I.C. Fed. of Labor 102 2nd Ave. Coralville, IA 52241		200.-	<input type="checkbox"/>
9.20	ACT Blue ON line	DAVID WHEELER 175 N. Harbor DR #1708 Chicago, IL 60601		100.-	<input type="checkbox"/>
9.26	1124	JOHN BOWD 221 N TAYLOR OAK PARK, IL 60302		250.-	<input type="checkbox"/>
9.28	9055	BERNITA ROSINAK 2314 Big Ben Rd Elm, IA 52227		25.-	<input type="checkbox"/>
9.29	ACT Blue ON line	KARA SAUNDERS 309 Lisbon Rd Mt. Vernon, IA 50314		50.-	<input type="checkbox"/>
9.29	ACT Blue ON line	MATTHEW VOGEL 229 Chrystie St #428 NY, NY 10003		100.-	<input type="checkbox"/>

SUB-TOTAL
 TOTAL (If last page of this schedule)
 \$ 1,150.-
 \$

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No. 1167 P. 17
SCHEDULE A
 (Rev. 07/03) **MONETARY RECEIPTS**
 CHECK THIS BOX IF AMENDING FORM

CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MMDD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/30	ID# CK# 6456	Rob Russell 209 E MARKET I.C., 52345		\$ 25.-	<input type="checkbox"/>
10/1	ID# CK# 1557	Greg Cross 3707 SE 18th ST Des Moines, 50320		150.-	<input type="checkbox"/>
10/1	ID# 9680 CK# 5135	C.R. Building Trds. Council 5000 J. ST. SW C.R. 52404		1,000.-	<input type="checkbox"/>
9/24	ID# CK# 4323	LINDA JORDAN 317 S. 3rd ST. MT. VERNON, 52314		50.-	<input checked="" type="checkbox"/>
9/25	ID# CK# 9517	Myrt Bowers 203 LINCOLN HWY MT VERNON, 52314		25.-	<input checked="" type="checkbox"/>
9.25	ID# CK# 3104	HAI DENDURENT 718 8th Ave N MT VERNON, 52314		50.-	<input checked="" type="checkbox"/>
9.25	ID# CK# 2349	John Cox 339 W. South ST Lisbon, 52353		50.-	<input checked="" type="checkbox"/>
9.29	ID# CK# 6496	KAY Graber 1236 SKYLINE DR C.R., 52408		50.-	<input checked="" type="checkbox"/>
9.29	ID# CK# 1257	CRAIG ENGEL 103 OAK RIDGE DR MT. VERNON, 52314		100.-	<input checked="" type="checkbox"/>
10.5	ID# CK# 1779	ROMAINE Faege PO Box 128 MT. VERNON, 52314		25.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$1,525.-	
TOTAL (if last page of this schedule)				\$	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizen's Good Willness

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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10.5.08	ID# CK# 1267	Robert Walte 613 D ST. MT. VERNON, 52314		\$ 25.-	<input checked="" type="checkbox"/>
10.5	ID# CK# 2081	Hugh Lifson 219 4th Ave N.W. MT. VERNON, 52314		25.-	<input checked="" type="checkbox"/>
10.5	ID# CK# 2416	Doug Hanson 412 N 3rd ST MT. VERNON, 52314		50.-	<input checked="" type="checkbox"/>
10.5	ID# CK# 7537	Vicky Wiesler 406 PALISADES RD. MT. VERNON, 52314		50.-	<input checked="" type="checkbox"/>
10.5	ID# CK# 2879	Judy Vopava 912 Willow Ln. Lisbon, 52253		50.-	<input checked="" type="checkbox"/>
10.5	ID# CK# 9763	Jay Williams 401 E 5th ST BIRMINGHAM, 52209	Father of Nate	100.-	<input checked="" type="checkbox"/>
10.5	ID# CK# 1978	MARY Jo Lessmerier 307 B Wolfe Ln MT. VERNON, 52314	Nate's Mother - (N-Grand)	300.-	<input checked="" type="checkbox"/>
9.12	ID# CK# 3604	Comm. Workers of Amer 369 CALIFORNIA ST. Waterloo, 50703		100.-	<input type="checkbox"/>
9.29	ID# CK# ON LINE	DANIEL CRAIG 23 HAMMOND ST #3 CAMBRIDGE, MA 02139		25.-	<input type="checkbox"/>
9.30	ID# CK# ON LINE	Daniel Faltes 87 WASHINGTON ST CONCORD, NH 03301		150.-	<input type="checkbox"/>
SUB-TOTAL				\$ 875.-	
TOTAL (if last page of this schedule)				\$	2000

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Lee Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/30	ID# ACT Blue CK# 012112	Katie Malague 2800 19th St. N.W Washington, DC 20009		\$ 100.00	<input type="checkbox"/>
10.1	ID# CK# 5016	David Steen 16 Briar Ridge Dr. NE Iowa City, 52240		50.00	<input type="checkbox"/>
10.1	ID# 8038 CK# 376724	United Food & Comm. Workers 1775 K. ST. NW Washington, DC 20006		1,000.00	<input type="checkbox"/>
10.6	ID# CK# 13961	M. J. McWilliams 11 Hillcrest Heights MT. VERNON, 52314		25.00	<input checked="" type="checkbox"/>
8.10	ID# 6021 CK# 002253	Credit Union Pol. Comm. PO Box 10409 Des Moines, 50306		2,000.00	<input type="checkbox"/>
10.16	ID# 6492 CK# 1011	SEIU Local 199 415 10th Ave Coralville, 52241		2,000.00	<input type="checkbox"/>
10.7	ID# CK# 4914	Scott Smith 512 110th St NE Solon, 52399		180.00	<input type="checkbox"/>
10.7	ID# CK# 6646	David Steen 16 Briar Ridge Dr Iowa City, 52240		50.00	<input type="checkbox"/>
10.9	ID# CK# 4890	Peter Fisher 6109 110th St. NE Solon, IA 52333		25.00	<input type="checkbox"/>
10.6	ID# CK# 3690	Deb Dakin 206 2nd Ave N. MT. VERNON, 52314		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$5,425.00	
TOTAL (If last page of this schedule)				\$	

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No. 1167 P. 20
SCHEDULE A
 (Rev. 07/03) **MONETARY RECEIPTS**
 CHECK THIS BOX IF AMENDING FORM

CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

STATE CANDIDATE NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10.7	ID# CK# 4384	Linda Halsey 419 N. 3rd St. MT. VERNON, 52314		\$ 25.-	<input checked="" type="checkbox"/>
10.1	ID# ACT Blue CK#	Jessica Vanden Berg 1200 N. HERNANDON #616 Arlington, 22201		250.-	<input type="checkbox"/>
10.1	ID# ACT Blue CK#	Sarah Leonard 942 1/2 Hyperion Los Angeles, 90029		250.-	<input type="checkbox"/>
10.1	ID# ACT Blue CK#	LYNN Himmelreich 1013 400th ST SW Oxford, 52322		250.-	<input type="checkbox"/>
10.1	ID# ACT Blue CK#	Malea Stenzel 1924 17th St #33 Washington, DC 20009		100.-	<input type="checkbox"/>
10.2	ID# ACT Blue CK#	Dustin Godsey 461 B W. Elliot St. Philadelphia, 19119		100.-	<input type="checkbox"/>
10.2	ID# ACT Blue CK#	Andrew Dupuy 6067 N. Hermitage Ave. Chicago, 60660		10.-	<input type="checkbox"/>
10.3	ID# ACT Blue CK#	Daniel Kruppick #411 115 SOLAR ST. Syracuse, 13204		25.-	<input type="checkbox"/>
10.5	ID# ACT Blue CK#	Patrick MacRay 2729 Ordway St. #2 Washington, 20009		50.-	<input type="checkbox"/>
10.2	ID# CK# 4113 4114	AFSCME Council 61 4320 N.W. 2nd Ave Des Moines, 50312		500.-	<input type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule) \$1,560.-
 \$ 2,010.-

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CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(8), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10.16.08	ID# 6046 CK# 4486	Justice For All 218 6th Ave. #526 Des Moines, 50309		\$ 500.00	<input type="checkbox"/>
10.7	ID# 6334 CK# 1269	Plumb. + Steamfitters 2501 Ball Ave Des Moines, 50321		500.00	<input type="checkbox"/>
10.7	ID# 8131 CK# 6665	Machinist Pol. League 9000 Machinist Pl. Upper Marlboro 20772		1,600.00	<input type="checkbox"/>
10.7	ID# 1919 CK# 6476	Shelly Buehl 312 2nd St West Des Moines, 50265		20.00	<input type="checkbox"/>
10.7	ID# 6476 CK# 1432	Laborers Local #43 600 5th St SW C.R. 52404		100.00	<input type="checkbox"/>
10.8	ID# 4302 CK# 6294	Sidney Lutz 1142 James Ave NE Swisher, 52338		25.00	<input type="checkbox"/>
10.9	ID# 6294 CK# 1199	I.C. Carpenters PAC 705 S. Clinton I.C., 52240		1,000.00	<input type="checkbox"/>
10.9	ID# 6255 CK# 9672	Patricia Hull 1509 28th Ave N. FT. Dodge, IA 50501	Aunt I.N.LAW	50.00	<input checked="" type="checkbox"/>
10.9	ID# 9672 CK# 1301	Plumbers + Pipefitters #125 1839 16th Ave SW C.R. 52404		1,000.00	<input type="checkbox"/>
10.12	ID# 7414 CK# 7414	LARRY MEYERS 2659 Newport Rd Solon, 52333		25.00	<input checked="" type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$4,220.00
 \$

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Willard

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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10.12	ID# CK# 10440	Kathleen Bowersox 1086 CLUB Rd. C.R., 52404		\$ 25.-	<input checked="" type="checkbox"/>
10.12	ID# CK# 2778	Kristine Warford 2004 Cambridge Dr CoAAville, 52241		50.-	<input checked="" type="checkbox"/>
10.12	ID# CK# 10127	Pauline Taylor 1917 GRADEN Dr Iowa City, 52246		85.-	<input checked="" type="checkbox"/>
10.12	ID# CK# 4183	Timothy Larson 1263 Hillview Ct NE Skokie, 52328		40.-	<input checked="" type="checkbox"/>
10.12	ID# CK# 1009	Paul Deaton 6664 Camelback Rd Solon, 52323		25.-	<input checked="" type="checkbox"/>
10.6	ID# CK# 2396	STEVEN B. Gobble 3050 K St NW #160 Washington DC 20007		25.-	<input checked="" type="checkbox"/>
10.6	ID# CK# 216	SAMUEL HARPER 184 Duddington AL SE WASHINGTON DC 20003		30.-	<input checked="" type="checkbox"/>
10.6	ID# CK# 415	JANIFER WING 1427 Corrollsburg AL. Washington, DC 20024		30.-	<input checked="" type="checkbox"/>
10.6	ID# CK# 312	CORINNA ZARAK 2515 ST NW #808 WASHINGTON, DC 20037		50.-	<input checked="" type="checkbox"/>
10.6	ID# CK# 203	BENJAMINE CLARK 2900 Woodley Rd #438 WASHINGTON, DC 20008		50.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 350.-	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

PATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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10.8	ID# 6084 CK# 844	J.A. ST. LAU 680 Barclay Blvd. Lincolnshire, IL 60069		\$ 500.-	<input type="checkbox"/>
10.6	ID# CK# ACT-Blue	Rachel GORLIN 6207 4th ST NW Washington, DC 20011		100.-	<input type="checkbox"/>
10.6	ID# CK# ACT-Blue	JACK MASSEY 3624 LAKE Houston, TX 77098		500.-	<input type="checkbox"/>
10.6	ID# CK# ACT-Blue	RYAN DAVIES 639 10th ST #B Washington DC 20002		20.-	<input type="checkbox"/>
10.8	ID# CK# ACT-Blue	Nicole ENFIELD 828 S. ALFRED ST. Alexandria, VA 22304		30.-	<input type="checkbox"/>
10.8	ID# CK# ACT-Blue	GRAY BROOKS 1423 Branchwater Cr. Birmingham, AL 35216		150.-	<input type="checkbox"/>
10.9	ID# 1753 CK# 1477	Retail Wholesale + Dept. Sbr 305 29th ST NY, NY 10016		1,500.-	<input type="checkbox"/>
10.9	ID# 6077 CK# 2003	J.A. Pharm 8615 Douglas Suite 16 Des Moines, IA 50322		100.-	<input type="checkbox"/>
10.10	ID# CK# 2641	Denny Dietrich 1508 Palisades Rd MT. VERNON, IA 52314		250.-	<input checked="" type="checkbox"/>
10.12	ID# CK# 4011	Linn Co. Dem. Cent. Comm PO Box 574 C.A., IA 52401		700.-	<input type="checkbox"/>
SUB-TOTAL				\$3,850.-	
TOTAL (if last page of this schedule)				\$	35212 35 435

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No. 1167 P. 24
SCHEDULE A
 (Rev. 07/03) **MONETARY RECEIPTS**
 CHECK THIS BOX IF AMENDING FORM

CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Pitkin & Lee Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10.9	ID# CK# CASH	Pass the Hat Shoeyville, IA		\$ 50.-	<input checked="" type="checkbox"/>
10.9	ID# CK# CASH	Carol & Bob Hustad 1585 Conestoga Tr Swisher, IA 52330		20.-	<input checked="" type="checkbox"/>
10.12	ID# CK# 11956	George HERMAN 1614 Deborah Dr Solen, IA 52333		25.-	<input checked="" type="checkbox"/>
10.13	ID# CK# 6930	KAY HALE 1265 PARKVIEW LN Ely, IA 52227		25.-	<input checked="" type="checkbox"/>
9.17	ID# CK# 180	Robert Smith 1125 Parkview Lane 20 Box 158 Ely, IA 52227		50.-	<input type="checkbox"/>
10.12 8	ID# Act Blue CK#	Peter LeGrant 1100 to Oakcrest St Apt B Jowa City, IA 52240		25.-	<input type="checkbox"/>
10.15	ID# Act Blue CK#	Rodd McLeod 2-8th Street NE #2 Washington DC 20002		100.-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 295.-

TOTAL (if last page of this schedule)

\$ 357.30

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FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7.17	ID# CK# 1037	LYNCH ROAD HIO HWY 30W MT. VERNON, IA 52314	Veh. maint - Natc Tire rotation oil change	\$ 32.56
7.17	ID# CK# 1035	Lisbon P.O. Lisbon, IA 52253	P.O. Box Rental	26.00
7.15	ID# CK# 1031	Lisbon, IA 52253	Stamps	210.-
7.16	ID# CK# 1032	AD CRAFT PO Box 24 C.R.I., IA 52406	Campaign stickers	360.40
7.16	ID# CK# 1033	CARTER PRINTING 1739 E GRAND AVE DES MOINES, IA 50316	CAMP. CARDS Remittance envel.	797.25
7.16	ID# CK# 1034	CARTER PRINTING 1739 E GRAND DES MOINES, IA 50316	Letterhead + envelopes	354.86
7.17	ID# CK# 1036	SAM SILKSTRO 307 B Wolfe Ln MT VERNON, IA 52314	Stipend	780.-
7.26	ID# CK# 1038	John's Grocery 401 E. MARKET IC, IA 52245	wine for 7/27 fundraiser	101.73
SUB-TOTAL				\$ 2662.80
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizen's for Wellness

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/27	ID# CK# 1082	SELF	cell phone usage	\$ 29.-
8/05	ID# CK# 1083	Jai. Co. Dems 509 S. Dubuque St. I.C., 52240	DONATION	150.-
8/07	ID# CK# 1084	SAM SRINASTAO 307 S Wolfe Ln MT. Vernon, 52314	GAS	50.-
8/7	ID# CK# 1085	Myers Research 6495 Eng. Hwy Ct. Springfield, VA 22152	RESEARCH poll	6,800.-
8/26	ID# CK# 1039	Lisbon P.O. Lisbon, 52253	STAMPS	\$ 210.-
8/3	ID# CK# ON LINE	Auburn Quad Inc PO Box 390728 Cambridge, 02139	TRANSMITTAL RPT.	0.99
8.20	ID# CK# 1089	SAM SRINASTAO 307 S Wolfe Ln MT Vernon, 52314	stipend	750.-
8.14	ID# CK# ON LINE	Auburn Quad Inc PO Box 390728 Cambridge, MA 02139	TRANSMITTAL RPT	3.95
SUB-TOTAL				\$ 7,993.94
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/8	ID# CK# 1086	GRACE Bible Fellowship 230 E MARKET LISHON 52252	PANCAKE bkrfst	\$ 24.00
8/9	ID# CK# 1087	LINCOLN Gate 117 1ST ST. MT. VERNON 52214	Food for volunteers	54.06
8/12	ID# CK# 1098	C.A. Gazette 500 3rd Ave SE CR 52401	Subscription	29.45
8/23	ID# CK# 1090	Kum + Go 2029 G St SW CR 52404	GAS	16.09
8/23	ID# CK# 1040	Io. Dem. Party 5061 FLEUR DR. DEAM. 50321	DONATION	1,000.-
8/24	ID# CK# 1041	Solon Amer Leg 222 W MAIN Solon, 58333	PANCAKE bkrfst	21.-
8/24	ID# CK# 1042	ST. PETER'S 4022 GORGONA RD CASPARE, 58338	church dinner	20.-
8/28	ID# CK# 1043	UFCW, LOCAL 808 PO Box 1514 MUSCATINE,	DONATION STRIKE fund	500.-
SUB-TOTAL				\$ 1664.61
TOTAL (if last page of this schedule)				\$

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8.24	ON LINE	Auburn Quad PO Box 390728 Cambridge 02139	TRANSMITTAL Report	\$ 5.93
9.11	ON LINE	Auburn Quad PO Box 390728 Cambridge, 02139	TRANSMITTAL Report	5.93
9.9	ON LINE	Auburn Quad PO Box 390728 Cambridge, 02139	TRANSMITTAL RPT.	40.50
9.14	ON LINE	Auburn Quad PO Box 390728 Cambridge, 02139	TRANSMITTAL RPT.	13.44
9.1	1044	Lisbon ID Lisbon, 52253	PANCAKE RST.	20.-
9.6	1045	CASEY'S Hwy. 30 Lisbon, 52253	GAS	29.40
9.7	1046	ST. John's MT. Vernon, 52214	PAIL DINNER	25.-
9.12	1047	CASEY'S Hwy. 30 Lisbon, 52253	GAS	28.57
SUB-TOTAL				\$ 167.79
TOTAL (if last page of this schedule)				\$

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/15	ID# CK# 1048	Carter Printing 1739 E GRAND Des Moines 50316	Invites for fundraisers	\$399.82
9/15	ID# CK# 1049	U S P S Linton, 52253	STAMPS	420.-
9/20	ID# CK# 1050	SAM SALUSTRO 307 B Wolfe Ln MT VERNON, 52314	Stipend	750.-
9/24	ID# CK# 1051	C.R. Gazette 500 3rd Ave SE C.R. 52461	Subscription	29.45
9/29	ID# CK# 1052	SAM SALUSTRO 307 B Wolfe Ln MT VERNON, 52314	CAR GAS	50.-
10/1	ID# CK# 1053	SAM SALUSTRO 307 B Wolfe Ln. MT VERNON, 52314	STAMPS	110.-
10/1	ID# CK# 1054	Lynch Ford 410 Hwy. 30 MT. VERNON, 52314	oil change	32.56
10/2	ID# CK# 1055	OH MEDIA 6300 Council St. C.R. 52402	COMMERCIAL product. & AIR TIME	3,422.47
SUB-TOTAL				\$5,208.20
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchasers of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Willerns

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/22	ID# ACT Blue CK# ON LINE	Auburn Quad PO Box 390728 Cambridge, 02139	TRANSMITTAL Report	\$ 5.93
9/21	ID# ACT Blue CK# ON LINE	Auburn Quad PO Box 390728 Cambridge, 02139	TRANSMITTAL Rpt.	3.95
10/5	ID# CK# 1056	Gwen's Restaurant Lisbon, 52253	FUNDRAISER Food, drink	150.-
9/30	ID# ACT Blue CK# ON LINE	Auburn Quad PO Box 390728 Cambridge, 02139	TRANSMITTAL RPT.	10.87
10/10	ID# CK# 1059	SOLON ECONOMIST P.O. Box 249 Solon, 52333	NEWSPAPER AD	139.50
10/8	ID# CK# 1097	ON MEDIA 6300 Council St CR 52402	commercial AIR TIME	2,922.47
10/5	ID# ACT Blue CK# ON LINE	Auburn Quad PO Box 390728 Cambridge, 02139	TRANSMITTAL RPT	40.92
10/10	ID# CK# 1059	COMPAG Advertising 417 1st Ave SE 52401 Cedar Rapids, IA	CABLE Advertising	700.-
SUB-TOTAL				\$ 3,973.64
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Willie Jones

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10.13	ID# CK# 1060	SAM Salustra 307 B Wolfe Ln MT. Vernon, 52314	GAS	\$ 100.-
10.8	ID# CK# ON Line	Auburn Quad PO Box 390728 Cambridge, 52139	TRANSMITTAL RPT	31.41
10.10	ID# CK# 1001	MT. V. 52314	Newspaper Ad	260.-
10/14	ID# CK# 1002	Terry Lessmeier 307 B Wolfe Ln MT. Vernon, 52314	Donation for J. Co mental Health	100.-
10.14	ID# CK# 1003	ON Media 6300 Council St CR 52402	Comm. Air time	3,360. ⁰⁵
10.14	ID# CK# 1004	MT. VERNON, 52314	Postage	126.-
10/10	ID# CK# 1058	Solon Economist PO Box 249 Solon, 52333	Newspaper Ad.	139.50
SUB-TOTAL				\$ 417.16
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:
 Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)
 Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(1).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Willemis

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10.12	ID# ACT Blue CK#	Auburn Quad PO Box 390728 Cambridge, MA 02139	transmittal rpt.	\$0.99
10.15	ID# ACT Blue CK#	Auburn Quad PO Box 390728 Cambridge, MA 02139	transmittal rpt	3.95
	ID# CK#			

SUB-TOTAL \$ 4.94

TOTAL (if last page of this schedule) \$ 25,793.17

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens Law Alliance

SCHEDULE E (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
7/27	Michael Lessmeier 307 B Wolfe Ln Mt. V, 22914	Brother-in-law	Food for 7/27 fundraiser	\$ 80.-	<input checked="" type="checkbox"/>
9/6	Paul Deaton 1664 Camelback Rd Scottsdale, AZ 85253		12 steel fence posts	33.96	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 113.96

TOTAL (if last page of this schedule) \$ 113.96

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Williams

SCHEDULE F (Rev. 02/08)	LOANS RECEIVED & REPAYED
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 700.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (if Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E - TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 700.00

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.